

HealthShare Montana

www.healthsharemontana.org

Data Sharing, Reporting and Analytic Capabilities

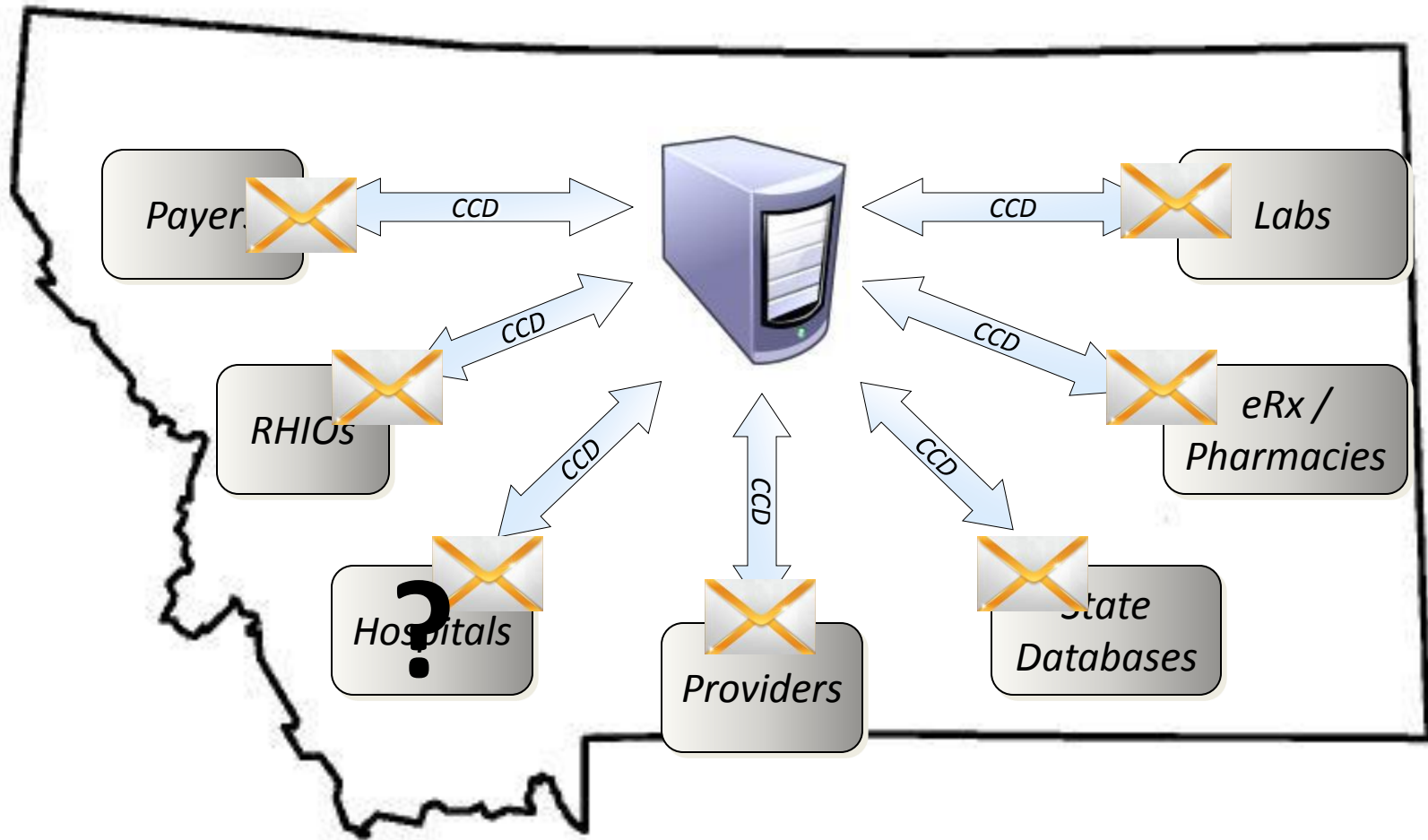


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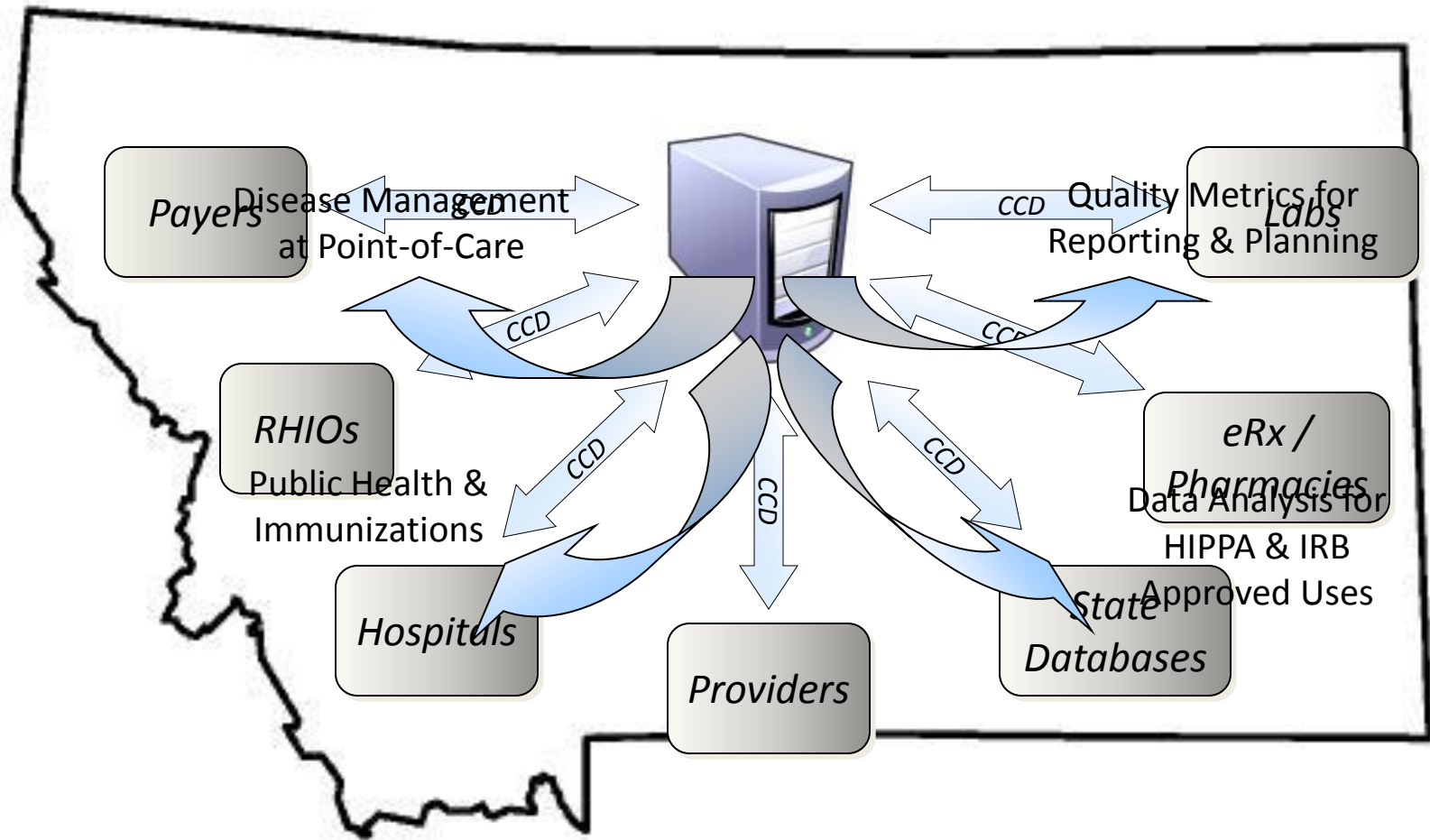
CCD-based health information exchange

will collect healthcare data from all sources in Montana



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CCD-based health information analysis population & patient-level reporting and analytics





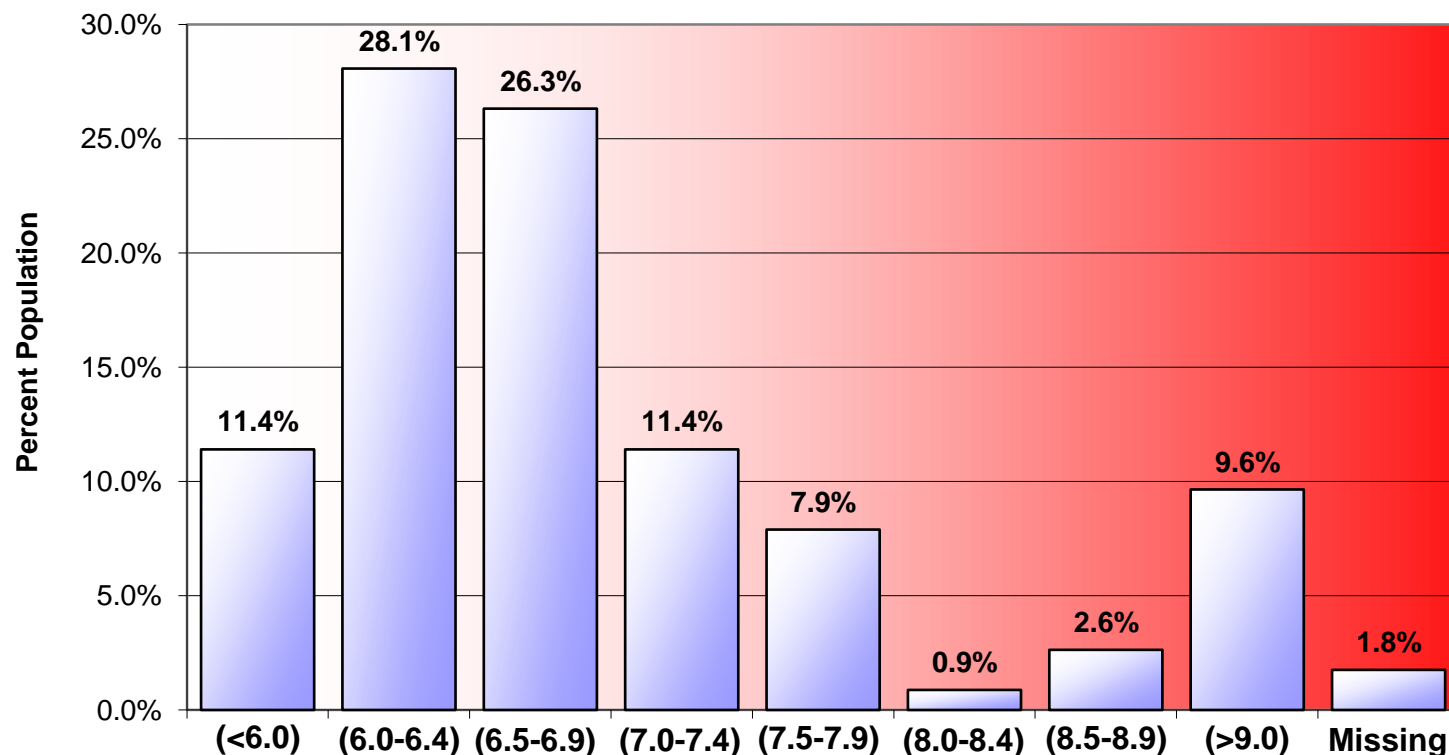
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Relationship of HSM CDR to web EHR used in demonstration

- HealthShare Montana's (HMS) CDR vendor is Covisint/DocSite.
- Anaconda Internal Medicine has been using DocSite's web EHR since 2006.
- DocSite started almost 20 years ago as an electronic registry for disease management and is stronger in this capability than are most EHRs.
- The HMS CDR will accept data from all standardized EHRs and other healthcare data sources throughout MT for CDS, data sharing, reporting and analysis.
- CDS and reporting capabilities on conditions and measures from the HSM CDR will be very similar to those currently part of the DocSite web EHR.
- The DocSite web EHR will be used to demonstrate the reporting capabilities of the HMS CDR.

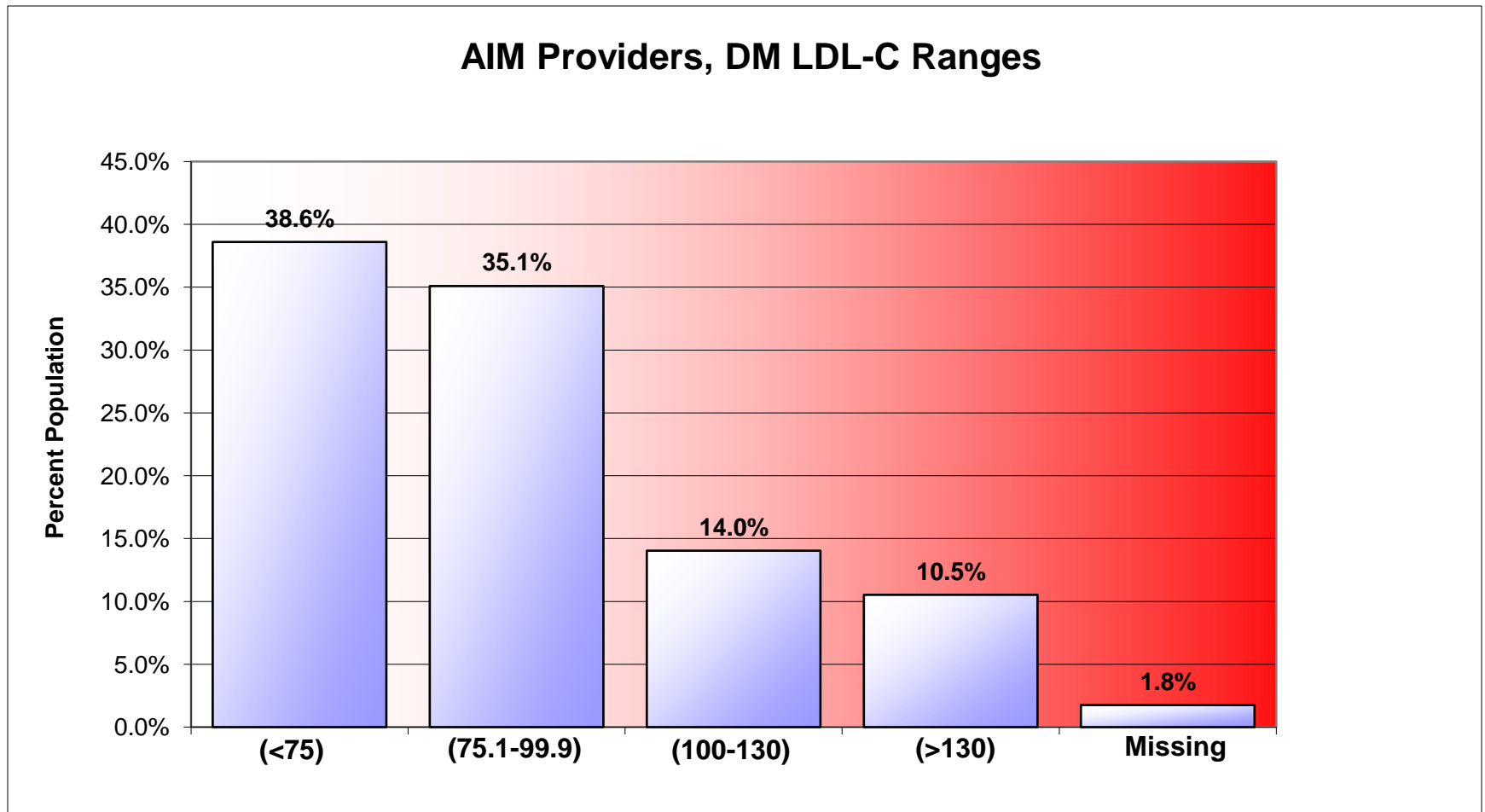
Example of QI report using DocSite population reports

AIM Providers - DM HbA1c Ranges, June, 2011



QC 2010: *HbA1c < 7.0%* - **42.10%**
BCBS MT 2010: *HbA1c < 7.0%* - **47.23%**
AIM (March) 2011: *HbA1c < 7.0%* - **65.79%**

Example of QI report using DocSite population reports



QC 2010:	<i>LDL < 100% - <u>47.00%</u></i>
BCBS MT 2010:	<i>LDL < 100% - <u>47.65%</u></i>
AIM (March) 2011:	<i>LDL < 100% - <u>73.70%</u></i>

President's Council of Advisors on Science and Technology December, 2010

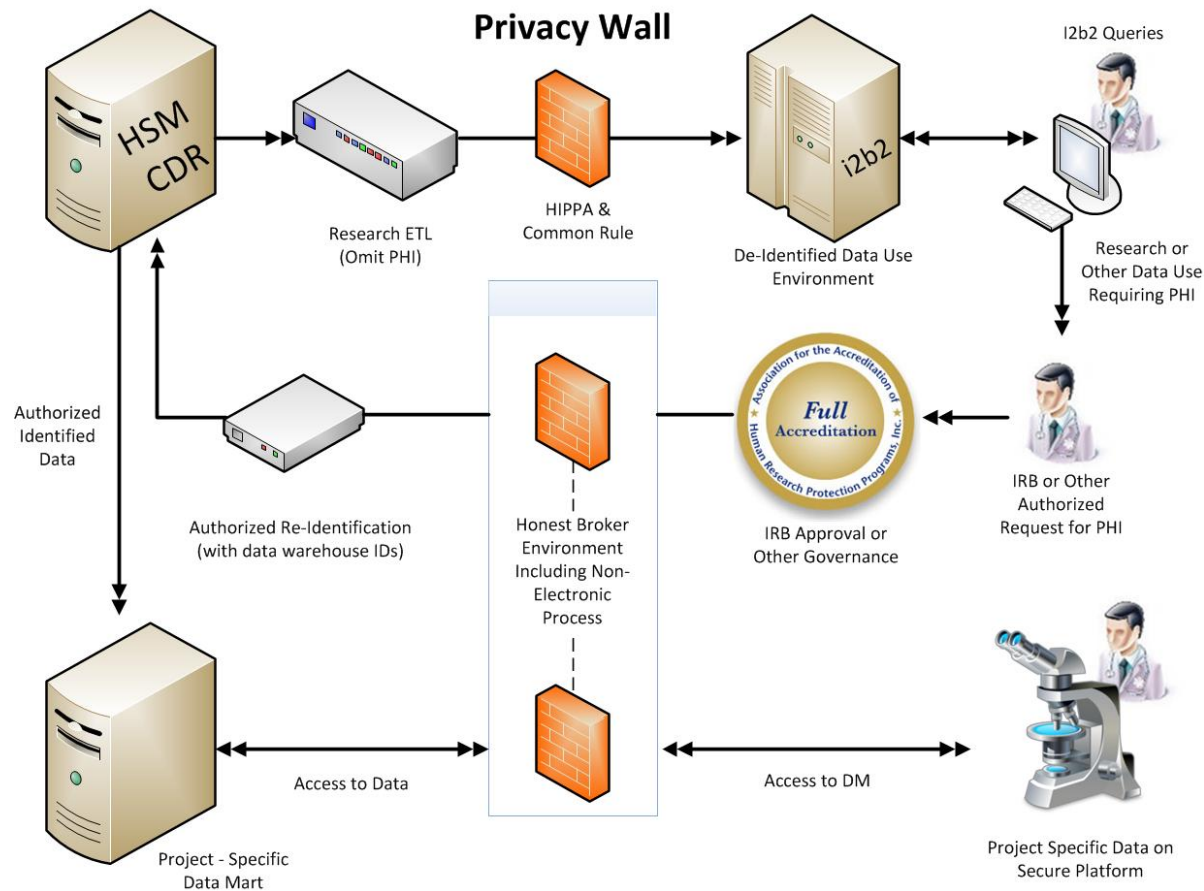
Need for more robust data analytics than simple reporting

"In selecting clinical quality measures for physicians, CMS chose to use a subset of measures from its Physician Quality Reporting Initiative. These measures are highly specified and can be submitted to (and received by) CMS only through specific, limited, technical methods.

PCAST has two concerns with this approach. The first concern is that although isolated, condition-specific measures such as "percent of patients with blood pressure under control" are relevant to population health, they are not adequate to assess the broad range of competencies required for physicians and healthcare organizations to deliver safe and effective care. There is good evidence that real improvements in quality will result only from generating and acting on data that reflect the multidimensional aspects of the clinical practice."

PCAST page 74.

HSM's *Informatics for Integrating with Biology with the Bedside (i2b2)* environment will allow robust multidimensional analysis of de-identified data from all sources with subsequent re-identification when indicated for approved uses



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Thank You!



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